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Bib Data Sheet

CONFIRMATION NO. 5838

|  |  |                              |  |  |                                   |   |  |  |                                      |                                 |
|--|--|------------------------------|--|--|-----------------------------------|---|--|--|--------------------------------------|---------------------------------|
| <b>SERIAL NUMBER</b><br>09/815,660   | <b>FILING DATE</b><br>03/23/2001<br><b>RULE</b>  | <b>CLASS</b><br>705          | <b>GROUP ART UNIT</b><br>U 2101<br>6 2 | <b>ATTORNEY DOCKET NO.</b><br>41556/04024<br>(RS1P036) |                                   |   |  |  |                                      |                                 |
| <b>APPLICANTS</b><br>George Henry Hoffman, Miami, FL;<br>Anthony Frank Menninger, Miami, FL;<br>Michael James Burk, Miramar, FL;<br>** CONTINUING DATA ***** <i>Name EJ</i><br>** FOREIGN APPLICATIONS ***** <i>Name EJ</i><br>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **<br>** 05/30/2001       |  |                              |  |  |                                   |   |  |  |                                      |                                 |
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>Verified and Acknowledged<br>Examiner's Signature <i>EO</i> Initials | <b>STATE OR COUNTRY</b><br>FL  | <b>SHEETS DRAWING</b><br>190 | <b>TOTAL CLAIMS</b><br>18              | <b>INDEPENDENT CLAIMS</b><br>3                         |                                   |   |  |  |                                      |                                 |
| <b>ADDRESS</b><br>Andrew C. Greenberg<br>Carlton Fields, P.A<br>P.O. Box 3239<br>Tampa ,FL 33601-3239  |  |                              |  |  |                                   |   |  |  |                                      |                                 |
| <b>TITLE</b><br>System, method and computer program product for a food and beverage supply chain management framework  |  |                              |  |  |                                   |   |  |  |                                      |                                 |
| <b>FILING FEE RECEIVED</b><br>420  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: <table border="1"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table> |                              |  |  | <input type="checkbox"/> All Fees | <input type="checkbox"/> 1.16 Fees ( Filing ) | <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) | <input type="checkbox"/> 1.18 Fees ( Issue ) | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Credit |
| <input type="checkbox"/> All Fees  |  |                              |  |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> 1.16 Fees ( Filing )  |  |                              |  |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )   |  |                              |  |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> 1.18 Fees ( Issue )   |  |                              |  |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> Other _____   |  |                              |  |  |                                   |   |  |  |                                      |                                 |
| <input type="checkbox"/> Credit  |  |                              |  |  |                                   |   |  |  |                                      |                                 |